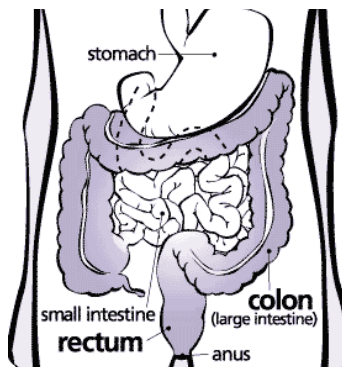


Screening for Colon Cancer



What is colon cancer?

Colon cancer is the second leading cancer killer in the United States and the third most common cancer overall. It begins as little non-cancerous growths (polyps) in the colon and rectum. If left undetected, they can become cancerous and spread to other organs.



Why is it important to get screened?

About 60% of people with colon cancer have cancer that has spread at the time of diagnosis. Early detection and removal of the polyps is key to preventing colon cancer.

Who should be screened?

Anyone who:

- Is 50 and older
- Eats foods high in fat, high in calories, and low in fiber
- Has a history of colon polyps
- Has a family history of colon cancer
- Has ulcerative colitis
- Has had cancer
- Has previous exposure to cancer causing substances

Possible Warning Signs

- Blood (either bright red or very dark) in the stool
- A change in bowel habits
- Diarrhea, constipation, or feeling that the bowel does not empty completely
- Thin, pencil-like stools
- Constant tiredness

Prevention

- **Know Your Family History**
- **Eat Right.** Cut down on fats. Eat more foods that are high in fiber.
- **Take Tests.** Screening tests don't prevent cancer. But they can help detect changes that may lead to cancer or find the cancer

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- Abdominal cramps or bloating
 - Feel a need to have frequent bowel movements
 - Weight loss with no known reason
 - Lower abdominal pain

How is the screening done?

Fecal Occult Blood Test

- Simple home test
- Collect stool samples on slides three times
- Mail slides back to the VA



This test should be repeated every year.

OR

Sigmoidoscopy or Colonoscopy

The doctor looks inside the lower gastrointestinal tract using a flexible lighted tube inserted into the intestine. The doctor can find and remove polyps during the test.

A sigmoidoscopy is recommended every 5 years.

A colonoscopy is recommended every 10 years.



Adapted from Colon Cancer from Jerry L. Pettis Memorial VAMC, Loma Linda, CA